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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/714,675	11/16/2000	Kenneth M. York	1856-00201

Joanna Payne  
CONOCO, INC.  
1000 South Pine 2635 RW  
P O Box 1267  
Ponca City, OK 74602-1267

**CONFIRMATION NO. 4404**  
**FORMALITIES LETTER**



\*OC000000005903806\*

Date Mailed: 03/26/2001

# NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

**FILED UNDER 37 CFR 1.53(b)**

**Filing Date Granted**

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

***A copy of this notice MUST be returned with the reply.***

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**PART 2 - COPY TO BE RETURNED WITH RESPONSE**

05/14/2001 VVAN11 00000043 032769 09714675  
01 FC:105 130.00 CH

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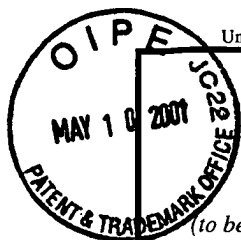


PTO/SB/021 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/714,675
		Filing Date	November 16, 2000
		First Named Inventor	Kenneth M. York
		Group Art Unit	1764
		Examiner Name	
Total Number of Pages in This Submission	6	Attorney Docket Number	1856-00201

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment (for an application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Copy of Notice to File Missing Parts;
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	DAVID A. ROSE
Signature	
Date	May <u>7</u> , 2001

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: May <u>7</u> , 2001			
Typed or Printed Name	M. A. CRABTREE		
Signature		Date	May <u>2</u> , 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, D.C. 20231.

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# **FREE TRANSMITTAL** **for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT**

\$ 130.00

**Complete if Known**

Application Number	09/714,675
Filing Date	November 16, 2000
First Named Inventor	Kenneth M. York
Examiner Name	
Group Art Unit	1764
Attorney Docket No.	1856-00201

**METHOD OF PAYMENT**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:  
 Deposit Account Number: 03-2769  
 Deposit Account Name: Conley, Rose & Tayon, P.C.  
☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:  
☐ Check ☐ Credit Card ☐ Money Order ☐ Other

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	\$
106 320	206 160	Design filing fee	\$
107 490	207 245	Plant filing fee	\$
108 710	208 355	Reissue filing fee	\$
114 150	214 75	Provisional filing fee	\$

**SUBTOTAL (1) \$****2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	20** = * x	18.00	= \$
Multiple Dependent Claims	3** = * x	80.00	= \$
		270.00	= \$00.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent Claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) \$**

\*\* or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	\$130.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	\$
139 130	139 130	Non-English specification	\$
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination	\$
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	\$
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	\$
115 110	215 55	Extension for reply within first month	\$
116 390	216 195	Extension for reply within second month	\$
117 890	217 445	Extension for reply within third month	\$
118 1,390	218 695	Extension for reply within fourth month	\$
128 1,890	228 945	Extension for reply within fifth month	\$
119 310	219 155	Notice of Appeal	\$
120 310	220 155	Filing a brief in support of an appeal	\$
121 270	221 135	Request for oral hearing	\$
138 1,510	138 1,510	Petition to institute a public use proceeding	\$
140 110	240 55	Petition to revive - unavoidable	\$
141 1,240	241 620	Petition to revive - unintentional	\$
142 1,240	242 620	Utility issue fee (or reissue)	\$
143 440	243 220	Design issue fee	\$
144 600	244 300	Plant issue fee	\$
122 130	122 130	Petitions to the Commissioner	\$
123 50	123 50	Petitions related to provisional applications	\$
126 180	126 180	Submission of Information Disclosure Stmt	\$
581 40	581 40	Recording each patent assignment per property (times number of properties)	\$
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	\$
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	\$
179 710	279 355	Request for Continued Examination (RCE)	\$
169 900	169 900	Request for expedited examination of a design application	\$
Other fee (specify)			\$

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$130.00****SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)

DAVID A. ROSE

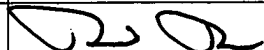
Registration No.  
(Attorney/Agent)

26,223

Telephone

(713) 238-8000

Signature



Date

May 7, 2001

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